



THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applicant:

YAIR MARYANKA

Serial No.: 09/941,598

Filed: August 30, 2001

Group Art Unit: 2634

For: SIGNALING OVER NOISY
CHANNELS

Attorney
Docket: 553/8

Examiner: Dac V. Ha

Commissioner of Patents and Trademarks
Washington, DC 20231

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ELECTION

Sir:

This is in response to the United States Patent and Trademark Office Action mailed January 7, 2005, which response is being made on or before February 7, 2005 and for which no extension fees are due. Please amend the above-identified application as follows:

04/13/2005 MGORDON 00000007 062140 09941598

01 FC:2201 200.00 DA
02 FC:2202 75.00 DA

09941598. 0

Application or Docket Number

55 318

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	35 minus 20 =	*
INDEPENDENT CLAIMS	7 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input checked="" type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	38	Minus	35 = 3
Independent	9	Minus	7	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus	** =
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus	** =
Independent		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=	135	OR X\$18=	
X40=	160	OR X80=	
+135=	135	OR +270=	
TOTAL	650	OR TOTAL	

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
25	75	OR X\$18=	
X\$ 9=		OR X80=	
160	200	OR +270=	
X40=		TOTAL	275
+135=		OR ADDIT. FEE	
TOTAL	275	ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL		TOTAL	
ADDIT. FEE		ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL		TOTAL	
ADDIT. FEE		ADDIT. FEE	

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